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27581

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04/07/2004

MEDTRONIC, INC.  
710 MEDTRONIC PARKWAY NE  
MS-LC340  
MINNEAPOLIS, MN 55432-5604

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I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimile transmitted to the USPTO, on the date indicated below.

WODI D. NICKEL (Depositor's name)  
Wodi D. Nickel (Signature)  
January 6, 2005 (Date)

APPLICATION NO.	FILED DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
09/713,598	11/15/2000	George Mann	P-0580.00	3041

TITLE OF INVENTION: MINIMALLY INVASIVE METHOD FOR IMPLANTING A SACRAL STIMULATION LEAD

APPL. TYPE	SMALL ENTITY	ISSUE FEE	PUBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	NO	\$1330	\$0	\$1330	07/07/2004

EXAMINER	ART UNIT	CLASS-SUBCLASS
MATTHEWS, WILLIAM H	3738	128-898000

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.563).

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2. For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys or agents OR, alternatively, (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.

Thomas F. Woods  
Keth M. Campbell  
Stephen W. Bauer

3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

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(A) NAME OF ASSIGNEE

(B) RESIDENCE: (CITY and STATE OR COUNTRY)

minneapolis, MN USA

Please check the appropriate assignee category or categories (will not be printed on the patent): ☐ individual ☒ corporation or other private group entity ☐ government

4a. The following fee(s) are enclosed:

☒ Issue Fee☐ Publication Fee☐ Advance Order - # of Copies \_\_\_\_\_

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(Title)

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